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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Application or Docket Number 10/658,819		Filing Date 09/08/2003		To be Mailed
	AF	PPLICATIO	N AS FILE	SMALL	OTHER THAN SMALL ENTITY OR SMALL ENTITY						
FOR NUMBE			NUMBER FIL	.ED	NUMBER EXTRA		RATE (\$)	FEE (\$)		RATE (\$)	FEE (\$)
BASIC FEE (37 CFR 1.16(a), (b), or (c))			N/A		N/A		N/A			N/A	
SEARCH FEE (37 CFR 1.16(k), (i), or (m))			N/A		N/A		N/A			N/A	
EXAMINATION FEE (37 CFR 1.16(o), (p), or (q))			N/A		N/A		N/A		:	N/A	
TOTAL CLAIMS (37 CFR 1.16(i))			minus 20 =		•		x \$ =		OR	x \$ =	
INDEPENDENT CLAIMS (37 CFR 1.16(h))			minus 3 =		•		x \$ =	·		x \$ =	
	APPLICATION SIZE (37 CFR 1.16(s))	FEE sh	If the specification and sheets of paper, the a is \$250 (\$125 for sma additional 50 sheets o 35 U.S.C. 41(a)(1)(G)		pplication size fee due ill entity) for each or fraction thereof. See						
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))									l		
* If the difference in column 1 is less than zero, enter *0" in column 2.							TOTAL			TOTAL	
APPLICATION AS AMENDED — PART II OTHER T (Column 1) (Column 2) (Column 3) SMALL ENTITY OR SMALL E									ER THAN ALL ENTITY		
AMENDMENT	03/23/2007	CLAIMS REMAINING AFTER AMENDMEN		HIGHEST NUMBER PREVIOUSI PAID FOR	PRESENT Y EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
	Total (37 CFR 1.18(i))	• 47	Minus	 47	= 0		X \$25 =	0	OR	x \$ =	
	Independent (37 CFR 1.16(h))	• 2	Minus	•••3	= 0		X \$100 =	0	OR	x \$ =	
	Application Size Fee (37 CFR 1.16(s))						•				
1	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR		
							TOTAL ADD'L FEE	0	OR	TOTAL ADD'L FEE	
		(Column 1)	(Column 2) (Column 3)						
ENT	1/9/87	CLAIMS REMAINING AFTER AMENDMEN		HIGHEST NUMBER PREVIOUSI PAID FOR	PRESENT LY EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
	Total (37 CFR 1.18(i))	.46	Minus	- 47	- 7		x \$ =		OR	X \$ =	
ΜO	Independent (37 CFR 1.16(h))	: ?	Minus	3	=0		x \$ =		OR	x \$ =	
AMENDME	Application Size Fee (37 CFR 1.16(s))										
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.18(j))								OR		
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20" peggy s. yarborough *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											

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